

# Wisconsin Department of Regulation & Licensing

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## DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

### PROFESSIONAL FUND-RAISER SOLICITATION NOTICE

**Important: Please read the following before completing this Solicitation Notice.**

Before performing services under a contract with a charitable organization that is required to be registered under sec. 440.42(1), Stats., a professional fund-raiser shall file with the Department, a completed Solicitation Notice and a copy of the contract pursuant to secs. 440.44(3), and (4), Stats.

The charitable organization on whose behalf the professional fund-raiser is acting, shall file with the Department a written confirmation that the Solicitation Notice and any accompanying material are true and complete to the best of its knowledge.

SECTION 440.44(8), Stats., requires a professional fund-raiser to deposit, in its entirety, a contribution of money received by the professional fund-raiser, on behalf of a charitable organization, in an account at a financial institution within 5 days after its receipt. The account shall be in the name of the charitable organization. The charitable organization shall have sole control of all withdrawals from the account.

SECTION 440.455, Stats., describes specific solicitation disclosure requirements. We urge you to review that section and become familiar with it.

The professional fund-raiser and charitable organization should study carefully sec. 440.44(7), Stats., which requires a complete accounting, in writing, to the charitable organization for all contributions received and all expenses incurred under the contract and the need to maintain those records for at least 3 years.

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1. NAME OF PROFESSIONAL FUND-RAISER:

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2. PROFESSIONAL FUND-RAISER REGISTRATION NUMBER:

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3. PRINCIPAL ADDRESS (number, street, city, state, zip):

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4. CHARITABLE ORGANIZATION:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

Wisconsin Registration Number: \_\_\_\_\_

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5. If conducting a solicitation for a fund raising event, state the name of the event, location of event and date of event:

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6. Projected period during which the solicitation will take place:

7. Locations and telephone numbers from which the soliciations will be conducted:

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8. Name and residence address of each person responsible for directing and supervising the conduct of services under the contract described in sec. 440.44(4), Stats.:

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9. Do you subcontract with another person or entity whp also performs fund raising activities in Wisconsin on behalf of the charitable organization? ☐ Yes ☐ No

If **YES**, provide the name and address of the person or company and copy of contract.

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10. Will the professional fund-raiser at any time, have custody of contributions? "Custody" is defined as possession or control of cash, checks or donation of merchandise even though checks may be made payable to the charitable organization. ☐ Yes ☐ No

11. Provide a full and fair description of the charitable purpose for which solicitations will be made:

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12. A copy of the contract with the charitable organization is enclosed, as required. ☐ Yes ☐ No

We, the undersigned, swear and affirm under penalties provided by law that this Solicitation Notice (including attachments), has been examined by us and is, to the best of our knowledge and belief, a true, correct and complete statement.

\_\_\_\_\_  
PRINT NAME OF PROFESSIONAL FUND-RAISER OFFICIAL

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
SIGNATURE OF PROFESSIONAL FUND-RAISER OFFICIAL

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINT NAME OF AUTHORIZED MEMBER OF CHARITABLE ORGANIZATION

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED MEMBER OF CHARITABLE ORGANIZATION

\_\_\_\_\_  
DATE